

Disclosure Report Cover

Amendment

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Yes

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No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

1. Committee Information			
a. Full Name		c. ID Number	
XAVIER CASON FOR SCHOOL BOARD			
b. Mailing Address (include City, State and Zip Code)		d. Date Filed	
PO BOX 14788 DURHAM, NC 27709		03/08/16	
		e. Phone Number	
		919-323-1691	
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name
2016	01/01/2016	02/29/2016	KENNETH D. GIBBS
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)	
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> Municipal <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </div> <div style="width: 48%;"> State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </div> </div>	
7. Type of Fund (if applicable, check one)		10. Special Report Name	
<input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
8. Number of Fundraisers this Report			
1			
11. Account Information		11. Account Information	
a. Financial Institution Full Name		a. Financial Institution Full Name	
Branch Bank & Trust		PayPal	
b. Purpose	c. Account Code	b. Purpose	c. Account Code
For campaign expenses and fund-raising	1	For campaign expenses and fundraising (electronic)	2
	d. Period Begin Balance		d. Period Begin Balance
	\$ 740.00		\$ 0.00
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.			
<u>Kenneth D Gibbs</u> Printed Name of Signer		<u>Kenneth D Gibbs</u> Signature of Appointed Treasurer	
		<u>3/8/16</u> Date	
FOR OFFICE USE ONLY			
Date Received:	IN PERSON	Employee:	<u>D. Hunt</u>
Date Postmarked:	<u>MAR 08 2016</u>	Employee:	
Date Scanned:	DURHAM BOE	Employee:	
Date Data Entered:		Employee:	
		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training	
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.			

Detailed Summary

Amendment

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Yes

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No

Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		2. Type of Report	3. ID Number
XAVIER CASON FOR SCHOOL BOARD		2016 FIRST QUARTER	
Start of Election Cycle: January 1, 2015		Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 740.00	\$ 0.00
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 486.24	\$ 526.24
6) Contributions from Individuals (CRO-1210)		\$ 835.34	\$ 1713.34
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00	\$ 0.00
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00	\$ 0.00
9) Loan Proceeds (CRO-1410)		\$ 0.00	\$ 0.00
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$ 0.00	\$ 0.00
11) Other Receipt Sources			
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00	\$ 0.00
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$ 0.00	\$ 0.00
11c) Outside Sources of Income (CRO-1250)		\$ 0.00	\$ 0.00
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$ 0.00	\$ 0.00
11 e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00	\$ 0.00
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1321.58	\$ 2239.58
13) Disbursements			
13a) Operating Expenditures (CRO-1310)		\$ 1270.48	\$ 1448.48
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 0.00	\$ 0.00
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00	\$ 0.00
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 0.00	\$ 0.00
15) Loan Repayments (CRO-1420)		\$ 0.00	\$ 0.00
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$ 0.00	\$ 0.00
17) In-Kind Contributions (CRO-1510)		\$ 0.00	\$ 0.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1270.48	\$ 1448.48
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 791.10	\$ 791.10
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 0.00	
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 0.00	
23) Debts and Obligations owed To the Committee (CRO-1620)		\$ 0.00	
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00	
25) Administrative Support (CRO-1710)		\$ 0.00	\$
26) Forgiven Loans (CRO-1440)		\$ 0.00	\$
27) 48-Hour Notice Reports Sum (CRO-2200)		\$ 0.00	\$
28) Contributions to be Refunded (CRO-1215)		\$ 0.00	\$

Aggregated Contributions from Individuals

Page

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Amendment

☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)				2. ID Number	
XAVIER CASON FOR SCHOOL BOARD					
3. Contributor Information					
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/24/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/25/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/25/16	\$ 12.60
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/26/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/28/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/28/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/31/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		01/31/16	\$ 12.60
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/01/16	\$ 12.60
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/04/16	\$ 38.41
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/02/16	\$ 12.60
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/12/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/13/16	\$ 38.41
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/13/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/13/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/14/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/15/16	\$ 38.41
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	Elec Funds Tr		02/15/16	\$ 25.51
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add	000123	CASH		02/10/16	\$ 40.00
<input type="checkbox"/> Remove					
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
<input type="checkbox"/> Add					\$
<input type="checkbox"/> Remove					\$
4. Total only this Page					\$ 486.24
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 486.24

Contributions from Individuals

Pg 1 of 4

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Xavier Cason for School Board						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
JESSICA STEVENS 3214 Appling Way DURHAM, NC 27703			Community Manager			
			c. Employer's Name/Specific Field			
			Greystar Apartments			
					e. Election Sum to Date	
					\$ 51.32	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Electronic		01/24/2016	\$ 51.32	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
ALETHEA BELL			RETIRED			
			c. Employer's Name/Specific Field			
			RETIRED			
					e. Election Sum to Date	
					\$ 51.32	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Electronic		01/26/2016	\$ 51.32	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
SHARRON TURNER 130 Park Street Apt. N Roxboro, NC 27573			Nurse			
			c. Employer's Name/Specific Field			
			BNC Care System			
					e. Election Sum to Date	
					\$ 102.94	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Electronic		02/06/2016	\$ 102.94	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 205.58	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$	

CRO-1210

NC State Board of Elections

April 2007

Contributions from Individuals

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Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Xavier Cason for School Board						
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
LISA HENINGER 4810 OLD NC HWY 86 HILLSBOROUGH, NC 27278			Media Specialist			
			c. Employer's Name/Specific Field			
			East Alamance High School			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Check		02/08/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
FREDERICK A. DAVIS 4 Chelan Ct. Durham, NC 27713			Pastor			
			c. Employer's Name/Specific Field			
			First Calvary Baptist Church			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Check		02/09/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
DEIDRA TRUITT 4709 Hoppers Drive Durham, NC 27704			Analyst			
			c. Employer's Name/Specific Field			
			Credit Suisse			
					e. Election Sum to Date	
					\$ 64.22	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Electronic		02/10/2016	\$ 64.22	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 264.22	
5. Total of ALL CRO-1210 Pages					\$	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 3 of 4

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)				2. ID Number	
Xavier Cason for School Board					
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
XAVIER CASON 4209 Grove Ridge Drive Durham, NC 27703		Retired			
		c. Employer's Name/Specific Field			
		Retired			
				e. Election Sum to Date	
				\$ 993.54	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	000123	Electronic		02/15/2016	\$ 115.54
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Tony Williams 627 Orindo Drive Durham, NC 27713		Retired			
		c. Employer's Name/Specific Field			
		Retired			
				e. Election Sum to Date	
				\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	000123	Check		02/16/2016	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Kayden Jenkins PO Box 72122 Durham, NC 27722		Instrument Technician			
		c. Employer's Name/Specific Field			
		Self-Employed			
				e. Election Sum to Date	
				\$ 50.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	000123	Check		02/16/2016	\$ 50.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page				\$ 215.54	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1196)				\$	

Contributions from Individuals

Pg 4 of 4

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Xavier Cason for School Board						
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
COREY ANNIS PO BOX 72122 Durham, NC 27722			M.D.			
			c. Employer's Name/Specific Field			
			Self-Employed		e. Election Sum to Date	
				\$ 50.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Check		02/16/2016	\$ 50.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
David E. Brown 829 Clarendon Street Durham, NC 27705			Retired			
			c. Employer's Name/Specific Field			
			Retired		e. Election Sum to Date	
				\$ 100.00		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	000123	Check		02/21/2016	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
				\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 150.00	
5. Total of ALL CRO-1210 Pages <small>(This line must be on line 6 of Detailed Summary Page CRO-1100)</small>					\$ 835.34	

Disbursements

Pg 1 of 2 Amendment ☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Xavier Cason for School Board						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Orlando's Custom Screen Print 2824 N. Roxboro Rd Durham, NC 27704			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
						\$ 1039.83
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000123	check	B	01/11/16	\$500.00	buttons sign down paymt	
00123	check	B	02/22/16	\$539.83	signs balance	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Reuben Ahukanna 314 Spring Street Durham, NC 27703			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
						\$ 150.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000123	electronic	C		\$150.00	band for fundraiser	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paypal, INC 2221 North First Street San Jose, CA 95131			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
						\$ 32.27
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000123	electronic	C		\$32.27	fundraiser fees	
				\$		
5. Total only this Page					\$ 1222.10	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other						
* Codes require detailed explanation in required remarks field (k)						

Disbursements

Pg 2 of 2

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Xavier Cason for School Board						
3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement)						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Eventbrite 155 5 th Street San Francisco, CA 94103					Electronic ticket sales	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 28.38	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000123	electronic	C	02/05/2016	\$28.38	fundraiser fees	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Facebook 1 Hacker Way Menlo Park, CA 94205						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 20.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
000123	electronic	O	2/29/16	\$20.00	market event page	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 48.38	
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 1270.48	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (k)						